



Waukesha County
Criminal Justice Collaborating Council
Evidence-Based Decision Making Mental Health Workgroup Minutes
Thursday, July 13, 2017

Team Members Present:

Anna Ruzinski (Co-Chair)	Mary Madden	Dr. Gordon Owley
Dr. James Rutherford	Robert Mueller	Sally Tess
Maura McMahon	Laura Lau	
Hon. Kathryn Foster	Andy Dresang	

Team Members Absent:

Antwayne Robertson (Co-Chair)	James Gumm	Dan Baumann
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Others Present: Rebecca Luczaj, Janelle McClain, Joan Sternweis, Jeff Lewis, Alan Johnson (ProHealth), Crystal Boyd (WCMHC), Debra Lane (WCMHC), Michelle Lambert-Webb (Froedtert), Jenna Jahnz (Froedtert), Erin Sarauer (Winnebago), Denise Abernethy (Elmbrook), Andy Cardoni (ProHealth), Mary Mattila (Froedtert)

Ruzinski called the meeting to order at 12:37 p.m. The meeting began with introductions amongst the committee members and guests present.

Approve Minutes from June 5, 2017

Motion: Owley moved, second by Foster, to approve the minutes from June 5, 2017. Motion carried unanimously.

Continue Discussion on Medical Clearance Process for Emergency Detentions (ED) and Discuss Process for Transferring Patients to Winnebago Mental Health Institute

Ruzinski has not been notified of any new issues from law enforcement regarding the medical clearance process. However, she indicated that there was an 8-9 hour wait on a recent case to transfer the person to Winnebago.

Sarauer reported that when they receive a call from a Mental Health Center (MHC) nurse, the nurse is only providing the name and date of birth of the patient. Without additional clinical, legal, and medical information, Winnebago cannot process the transfer. Sarauer stated that other counties have a crisis worker contact them. In order to start the transfer process, Winnebago needs to have the full clinical and legal information on the patient, as well as the background information of the person's situation, along with any medical needs of the person. Calls they receive that have all of this information receive a more priority response.

Cardoni reviewed the emergency department's medical clearance process with the group and suggested that it would be beneficial to map the whole process in order to make it more efficient.

Sarauer stated that Winnebago averages 20 referrals a day, but it is not uncommon for them to have 22 admissions and 19 discharges in a day. They had 170 youth admissions in May, with only a 34-bed youth unit. While they do not conduct a doctor-to-doctor consultation on every case, they will do a nurse-to-nurse consultation, and then the doctor and nursing supervisor review the information. However, if you feel that a

case requires a doctors input right away, you can request a doctor-to-doctor consultation, or request to speak with a higher-level staff member, such as Sarauer. Medical information is then faxed to Winnebago.

Abernethy stated that ER doctors know very little about what Winnebago's medical capabilities are. Mueller encouraged the ER doctors to tour Winnebago. Abernethy asked Sarauer if she could send a list of what Winnebago can/cannot do medically. Sarauer stated she will, and then added that they cannot do IV's, dialysis, ports, or detox. Sarauer reiterated that Winnebago is not a licensed detox facility. They cannot accept a voluntary patient, protective placement, or a 3-Party Petition for alcohol.

Luczaj distributed and Sarauer reviewed a document titled "Preadmission Screening Assessment" that contains all of the information Winnebago needs for admission to the facility.

Waukesha County crisis workers are only determining if the person should be emergency-detained. Once an ED is made, crisis workers are not able to undo it. They do not determine where the patient should be referred for treatment. Mueller stated that it would be helpful to know early in the process if the MHC is at capacity.

Waukesha County will update the one-page plan that is sent to the facility the patient is going to, to include the information that Winnebago needs for admission.

Abernethy commented that there seem to be many inappropriate Chapter 51's on overdoses and she is concerned that people will stop calling 9-1-1 if they think they will be emergency-detained. Ruzinski responded that someone who uses illegal drugs so negligently needs a crisis assessment. Abernethy would like to see data on whether forced treatment is effective. Cardoni stated that they are seeing 3-4 people per day who have been revived with Narcan. Mueller suggested that this would be good data to have from the hospitals.

Sarauer stated that Winnebago cannot accept patients unless they are under .10 BAC. She commented that it would be helpful if crisis workers could reassess a patient after they sober up because Winnebago is noticing that people who make suicidal statements or gestures while under the influence of drugs or alcohol are not necessarily remembering it later in the day when they are sober.

Lau left at 2:03 p.m. and Foster left at 2:07 p.m.

Update on Security Access to Epic for Mental Health Center Staff

Robertson has been in contact with ProHealth and Waukesha County has been approved for 10 users in Epic for read-only access, which will include the ability to print. It will be beneficial for staff to have access to Care Everywhere, which is part of the Epic system.

Discuss Storage and Disposal Protocol for Contraband/Drugs

This agenda item has been tabled until the next quarterly doctors' meeting.

Review and Discuss Recent Crisis Services Statistics

Owley distributed and reviewed the most recent crisis services statistics.

Discuss Agenda Items for Next Meeting

McClain will send a Doodle survey in order to schedule the next meeting when NIC Consultant, Mimi Carter, is in town on August 7 or 8, 2017.

The next quarterly meeting with the Mental Health Workgroup members and ER, MHC, and Winnebago staff will be held on October 9, 2017 at 9:00 a.m. The group will review and add to the existing medical clearance mapping.

Adjourn

The meeting adjourned at 2:23 p.m.